

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C90007907</div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH ST NW		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only Name of Employer Occupation		

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 8

THROUGH

M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 8

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

491.12

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM**SIGNATURE****DATE**

William Lutz

07/28/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

Papa John's Pizza

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	8

Mailing Address

5800 Gibson Blvd SE

Amount

42.82

City

Albuquerque

State

NM

Zip Code

87108

Purpose of Expenditure

pizza for canvassers

Category/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Pearce

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

242.04

Full Name (Last, First, Middle Initial) of Payee

Maggie Raiken

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	8

Mailing Address

3400 Comanche Rd #B218

Amount

100.00

City

Albuquerque

State

NM

Zip Code

87107

Purpose of Expenditure

cell phone

Category/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Pearce

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

332.27

Full Name (Last, First, Middle Initial) of Payee

Jesse Lifton

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	8

Mailing Address

1600 San Pedro Blvd NE

Amount

80.73

City

Albuquerque

State

NM

Zip Code

87102

Purpose of Expenditure

mileage

Category/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Steve Pearce

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

532.95

(a) SUBTOTAL of Itemized Independent Expenditures

223.55

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 4**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

Wal Mart

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	8

Mailing Address

301 San Mateo Blvd SE

Amount

13.14

City

Albuquerque

State

NM

Zip Code

87108

Purpose of Expenditure
suppliesCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

442.26

Full Name (Last, First, Middle Initial) of Payee

Smith's

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	8

Mailing Address

6001 Lomas NE

Amount

19.18

City

Albuquerque

State

NM

Zip Code

Purpose of Expenditure
suppliesCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

27.58

Full Name (Last, First, Middle Initial) of Payee

Brian McGann

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	8

Mailing Address

611 Lead Ave SW #428

Amount

100.00

City

Albuquerque

State

NM

Zip Code

87102

Purpose of Expenditure
cell phoneCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

6160.27

(a) **SUBTOTAL** of Itemized Independent Expenditures

132.32

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 / 4

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Jesse Lifton

Date

M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 8Mailing Address
1600 San Pedro Blvd NE

Amount

45.44

City State Zip Code
Albuquerque NM 87102Purpose of Expenditure
Gas and parkingCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought 532.95Full Name (Last, First, Middle Initial) of Payee
Jesse Lifton

Date

M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 8Mailing Address
1600 San Pedro Blvd NE

Amount

15.92

City State Zip Code
Albuquerque NM 87102Purpose of Expenditure
dinnerCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought 532.95Full Name (Last, First, Middle Initial) of Payee
Brian McGann

Date

M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 8Mailing Address
611 Lead Ave SW #428

Amount

73.89

City State Zip Code
Albuquerque NM 87102Purpose of Expenditure
mileageCategory/
Type

Office Sought:

☐ House

State: NM

Senate

☒ Senate

District: _____

☐ President

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Steve PearceDisbursement For:
2008☐ Primary☒ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought 6160.27

(a) SUBTOTAL of Itemized Independent Expenditures

135.25

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

491.12